

File Original and First Copy with  
Department of Ecology  
Second Copy — Owner's Copy  
Third Copy — Driller's Copy

# B+W DRILLING Co.

## WATER WELL REPORT

STATE OF WASHINGTON

Application No

Permit No

(1) OWNER: Name Race Lagoon Water Assn Address Well #2  
(2) LOCATION OF WELL: County Island 1/4 1/4 Sec 7 T31 N, R. 2 W  
Bearing and distance from section or subdivision corner

(3) PROPOSED USE: Domestic ☐ Industrial ☐ Municipal ☐  
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK. Owner's number of well (if more than one)  
New well ☒ Method Dug ☐ Bored ☐  
Deepened ☐ Cable ☐ Driven ☐  
Reconditioned ☐ Rotary ☒ Jetted ☐

(5) DIMENSIONS. Diameter of well 6 inches  
Drilled 320 ft Depth of completed well 320 ft

(6) CONSTRUCTION DETAILS.  
Casing installed: " Diam from 0 ft to 300 ft  
Threaded ☐ " Diam from     ft to     ft  
Welded ☒ " Diam from     ft to     ft

Perforations. Yes ☐ No ☐  
Type of perforator used      
SIZE of perforations     in by     in  
perforations from     ft to     ft  
perforations from     ft to     ft  
perforations from     ft to     ft

Screens. Yes ☐ No ☐  
Manufacturer's Name     Model No.      
Type      
Diam     Slot size     from     ft to     ft  
Diam     Slot size     from     ft to     ft

Gravel packed Yes ☐ No ☐ Size of gravel      
Gravel placed from     ft to     ft

Surface seal Yes ☐ No ☐ To what depth?     ft  
Material used in seal      
Did any strata contain unusable water? Yes ☐ No ☐  
Type of water?     Depth of strata      
Method of sealing strata off    

(7) PUMP Manufacturer's Name     HP  
Type    

(8) WATER LEVELS. Land-surface elevation above mean sea level     ft  
Static level     ft below top of well Date      
Artesian pressure     lbs per square inch Date      
Artesian water is controlled by     (Cap valve etc)

(9) WELL TESTS Drawdown is amount water level is lowered below static level  
Was a pump test made? Yes ☐ No ☐ If yes by whom?      
Yield     gal/min with     ft drawdown after     hrs

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level

Date of test      
Bailer test gal/min with     ft drawdown after     hrs  
Artesian flow gpm Date      
Temperature of water     Was a chemical analysis made? Yes ☐ No ☐

### (10) WELL LOG.

Formation Describe by color character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated with at least one entry for each change of formation

MATERIAL	FROM	TO
HARD PACKED SAND BR	0	7
HARD PAN BR	7	18
SAND DRY BR	18	43
HARD PAN GR	43	80
SAND W.W. BR	80	95
HARD PAN GR	95	210
GRAVEL GR	210	240
FINE SAND W.W. BR	240	300
GRAVEL BLACK W.W.	300	320

RACE LAGOON WATER ASSOCIATION PWS 03741 SRC 01  
ISLAND Long 122 595705 Lat 48 182307  
Well Tag AGA863

RECEIVED

APR 01 2008

DEPT. OF ECOLOGY

Work started 10/24/86 10 Completed 1/20/86 10

### WELL DRILLER'S STATEMENT

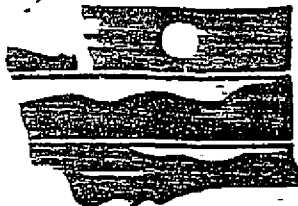
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief

NAME B+W Well Drilling  
(Person firm or corporation) (Type or print)

Address P.O. Box 55, Freeland, WA 98249

(Signed)     (Well Driller)

License No 264



WASHINGTON STATE  
DEPARTMENT OF  
ECOLOGY

# Well Tagging Form

Unique Well Tag No: \_\_\_\_\_

AGA 964 963

## RECORD VERIFICATION (check one)

☐

Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)

☐

Verification inconclusive

SRC #2

☐

Well Report not available

## WELL OWNERSHIP IF DIFFERENT FROM WELL REPORT

First Name

RACE LAGOON CO. ASSN

Last Name

0374/

Street Address

City

State

## LOCATION OF WELL IF DIFFERENT FROM WELL REPORT

Well Address

EMOT PL N300'

City

County

T

N

R

WM Sec

1/4 of the

## FOR AGENCY USE ONLY

Latitude

Longitude

Elevation at land surface \_\_\_\_\_ feet/meters (circle one)

Additional information, if available:

☐

Location marked on topographic map (please attach)

☐

Location marked on air photo (please attach)

☐

GPS

☐

Topographic Map

☐

Survey

☐

Computer generated

☐

Digital Altimeter

☐

Topographic Map

☐

Other

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.  
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FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)

6" CASING

Well head protected by a concrete pipe with a concrete lid. Is situated west of Source #1 and northwest of the reservoir.

6" CASING

WELL HEAD

WELL HEAD

Location of Well Identification Tag

6" CASING

Is supplemental tag needed for ease of identifying well?

☐

Yes

☐

No

Where was tag placed?

D	C	B	A
E	F	G	H
I	J	K	L
M	N	O	P
Q	R	S	T
U	V	W	X
Y	Z	AA	AB

Scale 1 24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION

REMARKS

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Permit Right #

Date Issued

One

Application

Permit

Certificate

Claim

Exempt

File Original and First Copy with  
Department of Ecology  
Second Copy — Owner's Copy  
Third Copy — Driller's Copy

# WATER WELL REPORT

STATE OF WASHINGTON

Permit No. \_\_\_\_\_

(1) OWNER: Name RACE LAQUON (#2) Address Coupe 98239  
(2) LOCATION OF WELL: County ISLAND SE 1/4 SE 1/4 Sec 7 T. 31 N. R. 2 E W.M.  
Bearing and distance from section or subdivision corner \_\_\_\_\_

(3) PROPOSED USE: Domestic ☒ Industrial ☐ Municipal ☒  
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) 2  
New well ☐ Method: Dug ☐ Bored ☐  
Deepened ☐ Cable ☒ Driven ☐  
Reconditioned ☒ Rotary ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.  
Drilled 320 ft. Depth of completed well 252 ft.

## (6) CONSTRUCTION DETAILS:

Casing installed: 6 " Diam. from 0 ft. to 234 ft.  
Threaded ☐ 5 " Diam. from 234 ft. to 242 ft.  
Welded ☒ " Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Perforations: Yes ☐ No ☒

Type of perforator used \_\_\_\_\_  
SIZE of perforations \_\_\_\_\_ in. by \_\_\_\_\_ in.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Screens: Yes ☒ No ☐

Manufacturer's Name COOK  
Type STAINLESS Model No. \_\_\_\_\_  
Diam. 6 " Slot size 1/4 from 242 ft. to 252 ft.  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Gravel packed: Yes ☐ No ☒ Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Surface seal: Yes ☒ No ☐ To what depth? 18+ ft.  
Material used in seal CLAY - BENTONITE  
Did any strata contain unusable water? Yes ☒ No ☐  
Type of water? SALT Depth of strata 320  
Method of sealing strata on CEMENT Plug

(7) PUMP: Manufacturer's Name \_\_\_\_\_  
Type Sub H.P. \_\_\_\_\_

(8) WATER LEVELS: Land-surface elevation 200+ ft.  
above mean sea level \_\_\_\_\_  
Static level 219 ft. below top of well Date Sept 87  
Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_  
Artesian water is controlled by \_\_\_\_\_ (Cap. valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level  
Was a pump test made? Yes ☒ No ☐ If yes, by whom? B.W. Rump  
Yield: \_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level

Date of test \_\_\_\_\_  
Bailer test 15 gal./min. with 8 ft. drawdown after 4 hrs.  
Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_  
Temperature of water \_\_\_\_\_ Was a chemical analysis made? Yes ☒ No ☐

## (10) WELL LOG:

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
REPAIRED-EXISTING WELL	WD	320'
WATER SAND	242'	252'
Plug of CEMENT/BENTONITE	252'	300'

RECOMMEND 20 G.P.M. MAX

RECEIVED  
OCT 10 1987  
DEPT. OF ECOLOGY

Work started \_\_\_\_\_, 19\_\_\_\_ Completed Aug, 1987

## WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME WHIDBEY DRILLERS  
(Person, firm, or corporation) (Type or print)

Address OAK HARBOR

[Signed] H Dennis Foter  
(Well Driller)

License No. 129 Date Sept, 1987

(USE ADDITIONAL SHEETS IF NECESSARY)



# Well Tagging Form

Unique Well Tag No: \_\_\_\_\_

AGA 964

## RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

SRC #2

## WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name RACE LAGOON CO. ASSN

Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

## LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address \_\_\_\_\_

EMMOT PL N3001

City \_\_\_\_\_

County \_\_\_\_\_

T \_\_\_\_\_ N R \_\_\_\_\_ W M Sec \_\_\_\_\_ 1/4 of the \_\_\_\_\_

## FOR AGENCY USE ONLY

Latitude \_\_\_\_\_

Longitude \_\_\_\_\_

Elevation at land surface \_\_\_\_\_ feet/meters (circle one)

Additional information, if available:

☐ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other \_\_\_\_\_

The Dep. The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)

6" CASING - HALF CINDER BLOCK / WOOD SHACK (~10-12') PAINTED  
GREEN AND SITTING SOUTH WEST OF RESERVOIR AND  
NORTH OF SOURCE #1

Location of Well Identification Tag

CASING

Is supplemental tag needed for ease of identifying well?

☐

Yes

☐

No

Where was tag placed?

D	C	B	A
E	F	G	H
I	L	K	J
M	P	Q	R

Scale 1 24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION \_\_\_\_\_

Comments

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Right #

Date Issued

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Application

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Exempt